

HOUSE BILL No. 1557

DIGEST OF INTRODUCED BILL

Citations Affected: IC 12-25-1-10; IC 16-18-2; IC 16-19-13; IC 25-10-1-16; IC 25-14-1-31; IC 25-22.5-5-7; IC 25-23-1-35; IC 25-23.5-5-16; IC 25-24-1-21; IC 25-27-1-13; IC 25-29-3-5; IC 25-34.5-2-14.

Synopsis: Minimum standards for bloodborne pathogens. Requires the state department of health to adopt minimum standards for use by certain health care employers of needleless systems and engineered sharps injury protection to protect employees from occupational injuries that may transmit bloodborne disease. Provides that the health care employers establish evaluation committees composed of front line health care workers to evaluate use of needleless systems and engineered sharps injury protection by the employer. Requires the state department to maintain a list of needleless systems and sharps with engineered sharps injury protection to assist employers in complying with the minimum standards.

Effective: Upon passage.

Mahern

January 19, 1999, read first time and referred to Committee on Public Health.



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Introduced

First Regular Session 111th General Assembly (1999)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 1998 General Assembly.

HOUSE BILL No. 1557

A BILL FOR AN ACT to amend the Indiana Code concerning health.

Be it enacted by the General Assembly of the State of Indiana:

1 SECTION 1. IC 12-25-1-10 IS ADDED TO THE INDIANA CODE
2 AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE
3 UPON PASSAGE]: **Sec. 10. IC 16-19-13 applies to a private mental**
4 **health institution licensed under this chapter.**

5 SECTION 2. IC 16-18-2-36.9 IS ADDED TO THE INDIANA
6 CODE AS A **NEW** SECTION TO READ AS FOLLOWS
7 [EFFECTIVE UPON PASSAGE]: **Sec. 36.9. "Bloodborne pathogen",**
8 **for purposes of IC 16-19-13, has the meaning set forth in**
9 **IC 16-19-13-1.**

10 SECTION 3. IC 16-18-2-114 IS AMENDED TO READ AS
11 FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 114. (a)
12 "Employer", for purposes of IC 16-41-11, has the meaning set forth in
13 IC 16-41-11-1.

14 (b) "Employer", for purposes of IC 16-19-13, has the meaning
15 set forth in IC 16-19-13-1.

16 SECTION 4. IC 16-18-2-114.5 IS ADDED TO THE INDIANA
17 CODE AS A **NEW** SECTION TO READ AS FOLLOWS

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[EFFECTIVE UPON PASSAGE]: **Sec. 114.5. "Engineered sharps injury protection", for purposes of IC 16-19-13, has the meaning set forth in IC 16-19-13-1.**

SECTION 5. IC 16-18-2-118.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 118.5. "Evaluation committee", for purposes of IC 16-19-13, has the meaning set forth in IC 16-19-13-1.**

SECTION 6. IC 16-18-2-121.3 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 121.3. "Exposure incident", for purposes of IC 16-19-13, has the meaning set forth in IC 16-19-13-1.**

SECTION 7. IC 16-18-2-244.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 244.5. "Needleless system", for purposes of IC 16-19-13, has the meaning set forth in IC 16-19-13-1.**

SECTION 8. IC 16-18-2-328.8 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 328.8. "Sharp", for purposes of IC 16-19-13, has the meaning set forth in IC 16-19-13-1.**

SECTION 9. IC 16-19-13 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]:

Chapter 13. Sharps Injury Protection

Sec. 1. (a) As used in this chapter, "bloodborne pathogens" means pathogenic microorganisms that are present in human blood and can cause disease in humans including:

- (1) hepatitis B virus;**
- (2) hepatitis C virus;**
- (3) human immunodeficiency virus; and**
- (4) any other pathogenic microorganism.**

(b) As used in this chapter, "employer" means:

- (1) a physician licensed under IC 25-22.5;**
- (2) a dentist licensed under IC 25-14;**
- (3) a hospital licensed under IC 16-21;**
- (4) a podiatrist licensed under IC 25-29;**
- (5) a chiropractor licensed under IC 25-10;**
- (6) an optometrist licensed under IC 25-24;**
- (7) a pharmacist licensed under IC 25-26;**
- (8) a health facility licensed under IC 16-28-2;**



(9) a registered or licensed practical nurse licensed under IC 25-23;

(10) a physical therapist licensed under IC 25-27;

(11) a home health agency licensed under IC 16-27-1;

(12) a community mental health center (as defined in IC 12-7-2-38);

(13) a private psychiatric hospital licensed under IC 12-25;

(14) a respiratory care practitioner certified under IC 25-34.5;

(15) an occupational therapist certified under IC 25-23.5;

(16) a state institution (as defined in IC 12-7-2-184);

(17) a blood center (as defined in IC 16-41-12-3); or

(18) any other employer regulated under IC 16;

that employs individuals with occupational exposure to blood or other material that may contain bloodborne pathogens.

(c) As used in this chapter, "engineered sharps injury protection" means a physical attribute built into:

(1) a needle device used for:

(A) withdrawal of body fluids;

(B) accessing a vein or artery; or

(C) administration of medications or other fluids;

that effectively reduces the risk of an exposure incident by a mechanism such as barrier creation, blunting, encapsulation, withdrawal, retraction, destruction, or other effective mechanisms; or

(2) any other type of needle device or nonneedle sharp that effectively reduces the risk of an exposure incident.

(d) As used in this chapter, "evaluation committee" means a committee that is:

(1) established by an employer; and

(2) composed of at least fifty percent (50%) frontline health care workers;

to evaluate use by the employer of needleless systems and sharps with engineered sharps injury protection.

(e) As used in this chapter, "exposure incident" means exposure to blood or other material that may contain bloodborne pathogens through an occupational injury caused by a sharp or other means.

(f) As used in this chapter, "needleless system" means a device that does not use needles for:

(1) withdrawal of body fluids after initial venous or arterial access is established;

(2) administration of medication or fluids; and



(3) any other procedure involving the potential for an exposure incident.

(g) As used in this chapter, "sharps" means objects used or encountered in a health care setting that can be reasonably anticipated to penetrate the skin or any other part of the body resulting in an exposure incident. The term includes:

- (1) needle devices;
- (2) scalpels;
- (3) lancets;
- (4) broken glass;
- (5) broken capillary tubes;
- (6) exposed ends of dental wires and dental knives; and
- (7) drills and burs.

Sec. 2. The state department shall adopt a minimum bloodborne pathogen standard not later than October 1, 1999, that includes the following requirements:

(1) An employer must use needleless systems and sharps with engineered sharps injury protection unless an evaluation committee determines that use of the devices will jeopardize patient or employee safety with regard to a specific medical procedure.

(2) An employer has written exposure control plans including a procedure requiring an evaluation committee to identify and select needleless systems and sharps with engineered sharps injury protection.

(3) An employer updates written exposure control plans at least annually to reflect progress in implementing needleless systems and sharps with engineered sharps injury protection as determined by an evaluation committee.

(4) An employer must record information concerning exposure incidents in a sharps injury log including:

- (A) the date and time of the incident;
- (B) the type and brand of sharp involved in the incident; and
- (C) a description of the incident including:
 - (i) the job classification of the exposed employee;
 - (ii) the department or work area where the incident occurred;
 - (iii) the procedure that the exposed employee was performing at the time of the incident;
 - (iv) a description of how the incident occurred;
 - (v) the body part involved in the incident;



(vi) if the sharp had engineered sharps injury protection, whether the protective mechanism was activated, and whether the injury occurred before the protective mechanism was activated, during activation of the mechanism, or after activation of the mechanism;

(vii) if the sharp had no engineered sharps injury protection, the exposed employee's opinion regarding whether and how such a mechanism could have prevented the injury and the basis for the employee's opinion; and

(viii) the employee's opinion about whether any other engineering, administrative, or work practice control could have prevented the injury and the basis for the opinion.

(5) Additional requirements determined necessary by the state department to prevent exposure incidents including:

(A) vaccinations;

(B) strategic placement of sharps containers as close to the work area as is practical; and

(C) increased use of personal protective equipment.

Sec. 3. (a) The state department shall require that each employer conduct product evaluations of needleless systems and sharps with engineered sharps injury protection beginning not later than October 1, 1999.

(b) Product evaluations under subsection (a) must be conducted on the following categories of devices:

(1) Intravenous catheters, access devices, and connectors.

(2) Vacuum tube blood collection devices.

(3) Blood drawing devices, including phlebotomy needle holders, butterfly devices, and syringes.

(4) Syringes.

(5) Suture needles.

(6) Scalpel devices.

(7) Any other category of device that may create risk of a sharps injury.

(c) A product evaluation under subsection (a) must be conducted for at least six (6) months by an evaluation committee composed of frontline health care workers that represent all areas where the device is used.

Sec. 4. The state department shall compile and maintain a list of needleless systems and sharps with engineered sharps injury protection to assist employers in complying with the requirements



of the bloodborne pathogen standard adopted under section 2 of this chapter. The list may be developed from existing sources of information, including the federal Food and Drug Administration, the federal Centers for Disease Control, the National Institute of Occupational Safety and Health, and the United States Department of Veterans Affairs.

Sec. 5. The state department shall adopt rules under IC 4-22-2, including emergency rules under IC 4-22-2-37.1, to implement this chapter.

SECTION 10. IC 25-10-1-16 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 16. IC 16-19-13 applies to chiropractors licensed under this chapter.**

SECTION 11. IC 25-14-1-31 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 31. IC 16-19-13 applies to dentists licensed under this chapter.**

SECTION 12. IC 25-22.5-5-7 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 7. IC 16-19-13 applies to physicians licensed under this chapter.**

SECTION 13. IC 25-23-1-35 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 35. IC 16-19-13 applies to nurses licensed under this chapter.**

SECTION 14. IC 25-23.5-5-16 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 16. IC 16-19-13 applies to occupational therapists certified under this chapter.**

SECTION 15. IC 25-24-1-21 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 21. IC 16-19-13 applies to optometrists licensed under this chapter.**

SECTION 16. IC 25-27-1-13 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 13. IC 16-19-13 applies to physical therapists regulated under this chapter.**

SECTION 17. IC 25-29-3-5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 5. IC 16-19-13 applies to podiatrists licensed under this article.**

SECTION 18. IC 25-34.5-2-14 IS ADDED TO THE INDIANA

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1 CODE AS A NEW SECTION TO READ AS FOLLOWS
2 [EFFECTIVE UPON PASSAGE]: **Sec. 14. IC 16-19-13 applies to**
3 **respiratory care practitioners certified under this chapter.**
4 SECTION 19. **An emergency is declared for this act.**

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